

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|----------|
| FEE DETERMINATION | VAN TRUONG | | 06-15-01 |
| O.I.P.E. CLASSIFIER | | 8 | 6-27-01 |
| FORMALITY REVIEW | TH | 953 | 08-08-01 |
| RESPONSE FORMALITY REVIEW | M.D. | 688 | 11-16-01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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